**ABET SELF-STUDY**

**QUESTIONNAIRE:**

**TEMPLATE FOR A SELF-STUDY REPORT**

**2015-2016 Review Cycle**

****

**APPLIED SCIENCE ACCREDITATION COMMISSION**

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# Introduction

The Self-Study Report is expected to be a quantitative and qualitative assessment of the strengths and limitations of the program being submitted for review.

The Self-Study Report will provide information critical to a thorough on-site review of the program. Therefore, the Report will address the extent to which the program meets applicable ABET Criteria and policies. In so doing, it is necessary that the Report address all methods of instructional delivery used for the program, all possible paths that students may take to completion of the degree, and all remote offerings available to students in the program.

Each Commission of ABET provides a ***Self-Study Questionnaire*** to assist the program in completing the Self-Study Report.

# Requirements and Preparation

The program name used on the cover of the Self-Study Report **must** be identical to that used in the institutional publications, on the ABET Request for Evaluation (RFE), and on the transcripts of graduates. This will insure that the program is correctly identified in ABET records and that graduates can be correctly identified as graduating from an accredited program.

Normally, each program requires a Self-Study Report.

While the *Questionnaire* focuses primarily on accreditation criteria, it also includes questions related to certain sections of the ABET *Accreditation Policy and Procedure Manual* (APPM).

While it is important that the overall structure in the *Questionnaire* be retained, it is not necessary to preserve notes or pages of instructions about preparing the Self-Study Report.

A program may use terminology different from that used in the *Questionnaire*. If different terminology is used, it is important that the Self-Study Report provide notes of explanation to clearly link the terminology in the Report to terminology used in the *Questionnaire*.

Tables in the *Questionnaire* may be modified in format to more clearly present the information for the program. When this is done, it is suggested that a brief explanatory footnote be included about why the table was modified. Rows may be added to or deleted from tables to better accommodate program information.

The **educational unit** is the administrative unit having academic responsibility for the program(s) being reviewed by a given Commission of ABET. For example, if a single program is being reviewed, the educational unit may be the department. If more than one program is being reviewed, the educational unit is the administrative unit responsible for the collective group of programs being reviewed by that Commission.

# Supplemental Materials

The following materials are to be supplied in addition to the Self-Study Report:

* The general institution catalog covering course details and other institutional information applicable at the time of the review.
* Promotional brochures or literature describing program offerings of the institution.
* Official academic transcripts of recent graduates. The **official academic transcript** contains a listing of all the courses taken by a graduate, year/semester courses were taken, the grades earned, and degree(s) earned. The team chair will request a specific sampling of transcripts for each program and will provide a timeframe in which they should be provided to program evaluators. Each academic transcript is to be accompanied by the program requirements for the graduate and accompanied by worksheets that the program uses to show how the graduate has fulfilled program requirements. Masters degree programs under review must also provide copies of the students’ undergraduate academic transcripts that were used to make an admission decision.

# Submission and Distribution of Self-Study Report

* **To ABET Headquarters by July 1** of the calendar year of the review:
	+ Submit **one** Self-Study Report including all appendices for **each** program
	+ Submit **one** set of the supplemental materials (**without the academic transcripts** to:

Applied Science Accreditation Commission

ABET

415 North Charles Street

Baltimore, MD 21201

**NOTE: The Self-Study Report and Supplemental Material should be submitted as pdf read-only files on CD, DVD, or data stick. Each Self-Study Report and Supplement Material must be self-contained in the medium submitted and must not include external hyperlinks. Catalogs that are available only electronically must be submitted in a pdf read-only format. The catalog must be the version available at the time the Self-Study Report is prepared. Web-based versions may not be submitted. The submission cannot be a combination of hard copy and electronic file. No email submission permitted.**

* **To Team Chair by July 1** of the calendar year of the review:
	+ Submit **one** Self-Study Report including all appendices for **each** program and
	+ Submit **one** set of the supplemental material
* **To Team Chair when requested after the team is set:**
	+ A set of transcripts for each program.

**NOTE: Please confirm the submission method for the Self-Study Report and address preference with the team chair prior to submission.**

The team chair will provide instructions and addresses for the institution to provide the Self-Study Report and Supplemental Material **directly** to each program evaluator and approved observer. Please do **not** send the Self-Study Report to the Program Evaluator until instructed to do so by the Team Chair.

When new or updated material becomes available between the submission of the Self-Study Report and the date of the on-site review, the program should provide it to the team members as far in advance as possible or upon the team’s arrival for the on-site review. All such materials should also be sent to ABET Headquarters.

# Confidentiality

All information supplied is for the confidential use of ABET and its authorized agents. It will not be disclosed without authorization of the institution concerned, except for summary data not identifiable to a specific institution or documents in the public domain.

# Template

The template for the Self-Study Report begins on the next page.

**ABET**

**Self-Study Report**

**for the**

**<Program Name>**

**at**

**<University Name>**

**<Location>**

**<Date>**

**CONFIDENTIAL**

The information supplied in this Self-Study Report is for the confidential use of ABET and its authorized agents, and will not be disclosed without authorization of the institution concerned, except for summary data not identifiable to a specific institution.

# Program Self-Study Report

for
ASAC of ABET
Accreditation or Reaccreditation

# BACKGROUND INFORMATION

1. ***Contact Information***

List name, mailing address, telephone number, fax number, and e-mail address for the primary pre-visit contact person for the program.

1. ***Program History***

Include the year implemented and the date of the last general review. Summarize major program changes with an emphasis on changes occurring since the last general review.

1. ***Options***

List and describe any options, tracks, concentrations, etc. included in the program.

1. ***Program Delivery Modes***

Describe the delivery modes used by this program, e.g., days, evenings, weekends, cooperative education, traditional lecture/laboratory, off-campus, distance education, web-based, etc.

1. ***Program Locations***

Include all locations where the program or a portion of the program is regularly offered (this would also include dual degrees, international partnerships, etc.).

1. ***Public Disclosure***

Provide information concerning all the places where the Program Education Objectives (PEOs), Student Outcomes (SOs), annual student enrollment and graduation data is posted or made accessible to the public. If this information is posted to the Web, please provide the URLs.

1. ***Deficiencies, Weaknesses or Concerns from Previous Evaluation(s) and the Actions Taken to Address Them***

Summarize the Deficiencies, Weaknesses, or Concerns remaining from the most recent ABET Final Statement. Describe the actions taken to address them, including effective dates of actions, if applicable. If this is an initial accreditation, it should be so indicated.

# GENERAL CRITERIA

# CRITERION 1. STUDENTS

For the sections below, attach any written policies that apply.

1. ***Student Admissions***

Summarize the requirements and process for accepting new students into the program.

1. ***Evaluating Student Performance***

Summarize the process by which student performance is evaluated and student progress is monitored. Include information on how the program ensures and documents that students are meeting prerequisites and how it handles the situation when a prerequisite has not been met.

1. ***Transfer Students and Transfer Courses***

Summarize the requirements and process for accepting transfer students and transfer credit. Include any state-mandated articulation requirements that impact the program.

1. ***Advising and Career Guidance***

Summarize the process for advising and providing career guidance to students. Include information on how often students are advised, who provides the advising (program faculty, departmental, college or university advisor).

1. ***Work in Lieu of Courses***

Summarize the requirements and process for awarding credit for work in lieu of courses. This could include such things as life experience, Advanced Placement, dual enrollment, test out, military experience, etc.

1. ***Graduation Requirements***

Summarize the graduation requirements for the program and the process for ensuring and documenting that each graduate completes all graduation requirements for the program. State the name of the degree awarded (Master of Science in Safety Sciences, Bachelor of Technology, Bachelor of Science in Computer Science, Bachelor of Science in Electrical Engineering, etc.)

1. ***Transcripts of Recent Graduates***

The program will provide transcripts from some of the most recent graduates to the visiting team along with any needed explanation of how the transcripts are to be interpreted. **These transcripts will be requested separately by the team chair.** State how the program and any program options are designated on the transcript. (See 2015-2016 APPM, Section II.G.4.a.). Masters degree programs under review must also provide copies of the same students’ undergraduate academic transcripts that were used to make an admission decision.

**CRITERION 2. PROGRAM EDUCATIONAL OBJECTIVES**

1. ***Mission Statement***

Provide the institutional mission statement.

1. ***Program Educational Objectives***

List the program educational objectives and state where these can be found by the general public.

1. ***Consistency of the Program Educational Objectives with the Mission of the Institution***

Describe how the program educational objectives are consistent with the mission of the institution.

1. ***Program Constituencies***

List the program constituencies. Describe how the program educational objectives meet the needs of these constituencies.

1. ***Process for Review of the Program Educational Objectives***

Describe the process that periodically reviews the program educational objectives including how the program’s various constituencies are involved in this process. Describe how this process is systematically utilized to ensure that the program’s educational objectives remain consistent with the institutional mission, the program constituents’ needs and these criteria.

# CRITERION 3. STUDENT OUTCOMES

1. ***Process for the Establishment and Revision of the Student Outcomes***

Describe the process used for establishing and revising student outcomes.

1. ***Student Outcomes***

List the student outcomes for the program and describe their relationship to those in Criterion 3 of the general criteria and any applicable program criteria. Display this information in Table 3-1. Indicate where the student outcomes are documented.

1. ***Relationship of Student Outcomes to Program Educational Objectives***

Describe how the student outcomes prepare graduates to attain the program educational objectives.

**Table 3-1. Relationship Between Program Student Outcomes and Criterion 3 Student Outcomes/Program Criteria**

Relationship of Program Student Outcomes to General Criteria Student

Outcomes and Program Specific Criteria Student Outcomes

Program Name

|  |  |  |
| --- | --- | --- |
| Program Student Outcomes | General Criteria | Program Specific Criteria |
| a | b | c | d | e | f | g | h | i | j | k | a | b | c | d | e | f |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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Add additional rows as needed.

# CRITERION 4. CONTINUOUS IMPROVEMENT

This section of your Self-Study Report should document your processes for regularly assessing and evaluating the extent to which the student outcomes are being attained. This section should also document the extent to which the student outcomes are being attained. It should also describe how the results of these processes are utilized to affect continuous improvement of the program.

Assessment is defined as one or more processes that identify, collect, and prepare the data necessary for evaluation. Evaluation is defined as one or more processes for interpreting the data acquired though the assessment processes in order to determine how well the student outcomes are being attained.

Although the program can report its processes as it chooses, the following is presented as a guide to help you organize your Self-Study Report.

1. ***Student Outcomes***

It is recommended that this section include (a table may be used to present this information):

1. A listing and description of the assessment processes used to gather the data upon which the evaluation of each student outcome is based. Examples of data collection processes may include, but are not limited to, specific exam questions, student portfolios, internally developed assessment exams, senior project presentations, nationally-normed exams, oral exams, focus groups, industrial advisory committee meetings, or other processes that are relevant and appropriate to the program.
2. The frequency with which these assessment processes are carried out
3. The expected level of attainment for each of the student outcomes
4. Summaries of the results of the evaluation process and an analysis illustrating the extent to which each of the student outcomes is being attained
5. How the results are documented and maintained
6. ***Continuous Improvement***

Describe how the results of evaluation processes for the student outcomes and any other available information have been systematically used as input in the continuous improvement of the program. Describe the results of any changes (whether or not effective) in those cases where re-assessment of the results has been completed. Indicate any significant future program improvement plans based upon recent evaluations. Provide a brief rationale for each of these planned changes.

1. ***Additional Information***

Copies of any of the assessment instruments or materials referenced in 4.A. and 4.B must be available for review at the time of the visit. Other information such as minutes from meetings where the assessment results were evaluated and where recommendations for action were made could also be included.

# CRITERION 5. CURRICULUM

### *Program Curriculum*

#### Complete Table 5-1 that describes the plan of study for students in this program including information on course offerings in the form of a recommended schedule by year and term along with average section enrollments for all courses in the program over the two years immediately preceding the visit. State whether you are on quarters or semesters and complete a separate table for each option in the program.

#### Describe how the curriculum aligns with the program educational objectives.

#### Describe how the curriculum and its associated prerequisite structure support the attainment of the student outcomes.

1. Attach a flowchart or worksheet that illustrates the prerequisite structure of the program’s required courses.

#### For each curricular area specifically addressed by either the general criteria or the program criteria as shown in Table 5-1, describe how your program meets the specific requirements for this program area in terms of hours and depth of study.

#### If your program has a capstone or other culminating experience for students specifically addressed by either the general or program criteria, describe how this project or experience is based upon the cumulative knowledge and skills acquired in earlier course work.

#### If your program allows cooperative education to satisfy curricular requirements specifically addressed by either the general or program criteria, describe the academic component of this experience and how it is evaluated by the faculty.

1. Describe by example how the review team will be able to relate the display materials, i.e. course syllabi, textbooks, sample student work, etc., to each student outcome. (See the 2015-2016 APPM section II.G.6.b.(2) regarding display materials.)

### *Course Syllabi*

In Appendix A, include a syllabus for each course used to satisfy the mathematics, science, and discipline-specific requirements required by Criterion 5 or any applicable program criteria. For required courses with multiple sections that do not use a common syllabus, please include a syllabus for each of the different sections.

*Table 5-1 Curriculum*

Program Name

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Course(Department, Number, Title) List all courses in the program by term starting with the first term of the first year and ending with the last term of the final year.  | Indicate Whether Course is Required, Elective, or a Selective Elective by an R, an E or an SE1 | *Curricular Area (Credit Hours)* | Last Two Terms the Course was Offered: Year and,Semester, orQuarter | Average Section Enrollmentfor the Last Two Terms the Course was Offered2  |
| Math & Basic Sciences | Discipline Specific Topics | General Education | Other |
|  |  |  |  |  |  |  |  |
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|  |  |  |  |  |  |  |  |
| *Add rows as needed to show all courses in the curriculum.* |  |  |  |  |  |  |  |
| OVERALL TOTAL CREDIT HOURS FOR THE DEGREE |  |  |  |  |  |  |  |
| PERCENT OF TOTAL |  |  |  |  |  |  |  |

* 1. Required courses are required of all students in the program, elective courses are optional for students, and selected electives are courses where students must take one or more courses from a specified group.
	2. For courses that include multiple elements (lecture, laboratory, recitation, etc.), indicate the average enrollment in each element.

Instructional materials and student work verifying compliance with ABET criteria for the categories indicated above will be required during the on-site visit.

# CRITERION 6. FACULTY

1. ***Faculty Qualifications***

Describe the qualifications of the faculty and how they are adequate to cover all the curricular areas of the program and also meet any applicable program criteria. This description should include the composition, size, credentials, and experience of the faculty. Complete Table 6-1. Include faculty resumes in Appendix B.

1. ***Faculty Workload***

Complete Table 6-2, Faculty Workload Summary and describe this information in terms of workload expectations or requirements for the current academic year.

1. ***Faculty Size***

Discuss the adequacy of the size of the faculty and describe the extent and quality of faculty involvement in interactions with students, student advising, and oversight of the program.

1. ***Professional Development***

Provide detailed descriptions of professional development activities for each faculty member.

1. ***Authority and Responsibility of Faculty***

Describe the role played by the faculty with respect to course creation, modification, and evaluation, their role in the definition and revision of program educational objectives and student outcomes, and their role in the attainment of the student outcomes. Describe the roles of others on campus, e.g., dean or provost, with respect to these areas.

*Table 6-1. Faculty Qualifications*

**Name of Program**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Faculty Name | Highest Degree Earned- Field and Year | Rank 1 | Type of Academic Appointment2T, TT, NTT | FT or PT3 | Years of Experience | Professional Registration/ Certification | Level of Activity4 H, M, or L |
| Govt./Ind. Practice | Teaching | This Institution | Professional Organizations | Professional Development | Consulting/summer work in industry |
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Instructions: Complete table for each member of the faculty in the program. Add additional rows or use additional sheets if necessary. Updated information is to be provided at the time of the visit.

1. Code: P = Professor ASC = Associate Professor AST = Assistant Professor I = Instructor A = Adjunct O = Other

2. Code: TT = Tenure Track T = Tenured NTT = Non Tenure Track

3. At the institution

4. The level of activity, high, medium or low, should reflect an average over the year prior to the visit plus the two previous years.

*Table 6-2. Faculty Workload Summary*

**Name of Program**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Faculty Member (name) | PT or FT1 | Classes Taught (Course No./Credit Hrs.) Term and Year2 | Program Activity Distribution3 | % of Time Devotedto the Program5 |
| Teaching | Research or Scholarship | Other4 |
|  |  |  |  |  |  |  |
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1. FT = Full Time Faculty or PT = Part Time Faculty, at the institution
2. For the academic year for which the Self-Study Report is being prepared.
3. Program activity distribution should be in percent of effort in the program and should total 100%.
4. Indicate sabbatical leave, etc., under "Other."
5. Out of the total time employed at the institution.

# CRITERION 7. FACILITIES1

***A.******Offices, Classrooms and Laboratories***

Summarize each of the program’s facilities in terms of their ability to support the attainment of the student outcomes and to provide an atmosphere conducive to learning.

1. Offices(such asadministrative,faculty, clerical, and teaching assistants) and any associated equipment that is typically available there.

2. Classrooms and associated equipment that are typically available where the program courses are taught.

3. Laboratory facilities including those containing computers (describe available hardware and software) and the associated tools and equipment that support instruction. Include those facilities used by students in the program even if they are not dedicated to the program and state the times they are available to students. Complete Appendix C containing a listing of the major pieces of equipment used by the program in support of instruction.

***B. Computing Resources***

Describe any computing resources (workstations, servers, storage, networks including software) in addition to those described in the laboratories in Part A, which are used by the students in the program. Include a discussion of the accessibility of university-wide computing resources available to all students via various locations such as student housing, library, student union, off-campus, etc. State the hours the various computing facilities are open to students. Assess the adequacy of these facilities to support the scholarly and professional activities of the students and faculty in the program.

***C. Guidance***

Describe how students in the program are provided appropriate guidance regarding the use of the tools, equipment, computing resources, and laboratories.

***D. Maintenance and Upgrading of Facilities***

Describe the policies and procedures for maintaining and upgrading the tools, equipment, computing resources, and laboratories used by students and faculty in the program.

***E. Library Services***

Describe and evaluate the capability of the library (or libraries) to serve the program including the adequacy of the library’s technical collection relative to the needs of the program and the faculty, the adequacy of the process by which faculty may request the library to order books or subscriptions, the library’s systems for locating and obtaining electronic information, and any other library services relevant to the needs of the program.

1. ***Overall Comments on Facilities***

Describe how the program ensures the facilities, tools, and equipment used in the program are safe for their intended purposes (See the 2015-2016 - APPM II.G.6.b.(1)).

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1Include information concerning facilities at all sites where program courses are delivered.

# CRITERION 8. INSTITUTIONAL SUPPORT

1. ***Leadership***

Describe the leadership of the program and discuss its adequacy to ensure the quality and continuity of the program and how the leadership is involved in decisions that affect the program.

### *B. Program Budget and Financial Support*

1. Describe the process used to establish the program’s budget and provide evidence of continuity of institutional support for the program. Include the sources of financial support including both permanent (recurring) and temporary (one-time) funds.
2. Describe how teaching is supported by the institution in terms of graders, teaching assistants, teaching workshops, etc.
3. To the extent not described above, describe how resources are provided to acquire, maintain, and upgrade the infrastructures, facilities, and equipment used in the program.
4. Assess the adequacy of the resources described in this section with respect to the students in the program being able to attain the student outcomes.

### *C. Staffing*

Describe the adequacy of the staff (administrative, instructional, and technical) and institutional services provided to the program. Discuss methods used to retain and train staff.

***D. Faculty Hiring and Retention***

1. Describe the process for hiring of new faculty.
2. Describe strategies used to retain current qualified faculty.

### *E. Support of Faculty Professional Development*

Describe the adequacy of support for faculty professional development, how such activities such as sabbaticals, travel, workshops, seminars, etc., are planned and supported.

# PROGRAM CRITERIA

Describe how the program satisfies any applicable program criteria. If already covered elsewhere in the self-study report, provide appropriate references.

**APPENDICES**

# Appendix A – Course Syllabi

Please use the following format for the course syllabi (2 pages maximum in Times New Roman 12 point font)

1. Course number and name
2. Credits and contact hours
3. Instructor’s or course coordinator’s name
4. Text book, title, author, and year
5. other supplemental materials
6. Specific course information
7. brief description of the content of the course (catalog description)
8. prerequisites or co-requisites
9. indicate whether a required, elective, or selected elective (as per Table 5-1) course in the program
10. Specific goals for the course
11. specific outcomes of instruction, ex. The student will be able to explain the significance of current research about a particular topic.
12. explicitly indicate which of the student outcomes listed in Criterion 3 or any other outcomes are addressed by the course.
13. Brief list of topics to be covered

# Appendix B – Faculty Vitae

Please use the following format for the faculty vitae (2 pages maximum in Times New Roman 12 point type)

1. Name
2. Education – degree, discipline, institution, year
3. Academic experience – institution, rank, title (chair, coordinator, etc. if appropriate), when (ex. 1990-1995), full time or part time
4. Non-academic experience – company or entity, title, brief description of position, when (ex. 1993-1999), full time or part time
5. Certifications or professional registrations
6. Current membership in professional organizations
7. Honors and awards
8. Service activities (within and outside of the institution)
9. Briefly list the most important publications and presentations from the past five years – title, co-authors if any, where published and/or presented, date of publication or presentation
10. Briefly list the most recent professional development activities

# Appendix C – Equipment

Please list the major pieces of equipment used by the program in support of instruction.

# Appendix D – Institutional Summary

Programs are requested to provide the following information.

### *The Institution*

#### Name and address of the institution

#### Name and title of the chief executive officer of the institution

1. Name and title of the person submitting the Self-Study Report.
2. Name the organizations by which the institution is now accredited, and the dates of the initial and most recent accreditation evaluations.
3. ***Type of Control***

Description of the type of managerial control of the institution, e.g., private-non-profit, private-other, denominational, state, federal, public-other, etc.

1. ***Educational Unit***

Describe the educational unit in which the program is located including the administrative chain of responsibility from the individual responsible for the program to the chief executive officer of the institution. Include names and titles. An organization chart may be included.

1. ***Academic Support Units***

List the names and titles of the individuals responsible for each of the units that teach courses required by the program being evaluated, e.g., mathematics, physics, etc.

1. ***Non-academic Support Units***

List the names and titles of the individuals responsible for each of the units that provide non-academic support to the program being evaluated, e.g., library, computing facilities, placement, tutoring, etc.

1. ***Credit Unit***

It is assumed that one semester or quarter credit normally represents one class hour or three laboratory hours per week. One academic year normally represents at least 28 weeks of classes, exclusive of final examinations. If other standards are used for this program, the differences should be indicated.

1. ***Tables***

Complete the following tables for the program undergoing evaluation.

*Table D-1. Program Enrollment and Degree Data*

**Name of the Program**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Academic Year | Enrollment Year | TotalUndergrad | TotalGrad | Degrees Awarded |
|  | 1st | 2nd | 3rd | 4th | 5th | Associates | Bachelors | Masters | Doctorates |
| Current |  | FT |  |  |  |  |  |  |  |  |  |  |  |
| Year | PT |  |  |  |  |  |  |  |  |  |  |
| 1 |  | FT |  |  |  |  |  |  |  |  |  |  |  |
|  | PT |  |  |  |  |  |  |  |  |  |  |
| 2 |  | FT |  |  |  |  |  |  |  |  |  |  |  |
|  | PT |  |  |  |  |  |  |  |  |  |  |
| 3 |  | FT |  |  |  |  |  |  |  |  |  |  |  |
|  | PT |  |  |  |  |  |  |  |  |  |  |
| 4 |  | FT |  |  |  |  |  |  |  |  |  |  |  |
|  | PT |  |  |  |  |  |  |  |  |  |  |

Give official fall term enrollment figures (head count) for the current and preceding four academic years and undergraduate and graduate degrees conferred during each of those years. The "current" year means the academic year preceding the on-site visit.

FT--full time

PT--part time

***Table D-2. Personnel***

**Name of the Program**

Year1: \_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
|  | HEAD COUNT | FTE2 |
| FT | PT |
| Administrative2 |  |  |  |
| Faculty (tenure-track)3 |  |  |  |
| Other Faculty (excluding student Assistants) |  |  |  |
| Student Teaching Assistants4 |  |  |  |
| Technicians/Specialists |  |  |  |
| Office/Clerical Employees |  |  |  |
| Others5 |  |  |  |

Report data for the program being evaluated.

1. Data on this table should be for the fall term immediately preceding the visit. Updated tables for the fall term when the ABET team is visiting are to be prepared and presented to the team when they arrive.
2. Persons holding joint administrative/faculty positions or other combined assignments should be allocated to each category according to the fraction of the appointment assigned to that category.
3. For faculty members, 1 FTE equals what your institution defines as a full-time load
4. For student teaching assistants, 1 FTE equals 20 hours per week of work (or service). For undergraduate and graduate students, 1 FTE equals 15 semester credit-hours (or 24 quarter credit-hours) per term of institutional course work, meaning all courses — science, humanities and social sciences, etc.

5 Specify any other category considered appropriate, or leave blank.

# *Signature Attesting to Compliance*

By signing below, I attest to the following:

That \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (*Name of the program(s)*) has conducted an honest assessment of compliance and has provided a complete and accurate disclosure of timely information regarding compliance with ABET’s *Criteria for Accrediting Applied Science Programs* to include the General Criteria and any applicable Program Criteria, and the ABET *Accreditation Policy and Procedure Manual.*

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Dean’s Name (As indicated on the RFE)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature Date**